Author’s response to reviews

Title: A randomized controlled double blind trial comparing the effects of the prophylactic antibiotic, Cefazolin, administered at Caesarean delivery at two different timings (before skin incision and after cord clamping) on both the mother and newborn

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Author’s response to reviews:

Reviewer 2
Response to Reviewer Comments (Version 3):
Reference No: PRCH-D-16-00087R3

Title: A randomized controlled double blind trial comparing the effects of the prophylactic antibiotic, Cefazolin, administered at Caesarean delivery at two different timings (before skin incision and after cord clamping) on both the mother and newborn

Authors: Chinta Annie Jyothirmayi, MD; Ajay Halder, MD; Bijesh Yadav, M.Sc.; Santosh Thomas Samuel, MD, DGO; Anil Kuruvilla, MD; Ruby Jose

BMC Pregnancy and Childbirth
Reviewer reports:

Elizabeth Moore (Reviewer 2): Thank you for addressing my concerns and for your explanations. The corrections have made it a much better paper.

Reply:

Thank you very much for correcting our paper and providing your valuable comments to modify the manuscript.

Reviewer 3

Reviewer reports:

Scott A Sullivan (Reviewer 3): BMC

Comment 1:

Abstract. I don't agree that the quantity of the antibiotic was found to be inconsequential to the newborn. The 2-3 % is low, but this study is not powered for neonatal sepsis.

Reply 1: Thank you for pointing this out once again. Now the sentence in the conclusion is deleted.

Comment 2:

Background: Line 22-24 This sentence is oddly worded and more conversational that scientific. Recommend deletion or revision.

Reply 2: The sentence has now been removed. Thank you.

Comment 3:

Patients and Methods: Page 7, Line 3-4, it says the reason for loss to follow up is listed below, but then it isn't explained until page 9.

Reply 3: Since the reasons are given elsewhere, the words "given below" has been removed.
Comment 4:

Results: What did the other 3 neonates die from?

Reply 4: The reasons for the neonatal deaths for the 3 neonates were the following:

1. Died on day 3 with pulmonary hypertension secondary to meconium aspiration syndrome.
2. Died on day 3 with the diagnosis of diaphragmatic hernia (diagnosed after birth) and pulmonary hypertension.
3. Baby had multiple congenital anomalies and died on day 2.

Comment 5:

You can’t really have a mean Apgar of 8.5, as this isn't a viable score. Usually for these types of categorical variables, rank-sum tests or other non-parametric testing is most appropriate.

Reply 5: Thank You. Now it is corrected as suggested.

Comment 6:

Again, I would eliminate outcomes that had no cases in the study, ie NEC or sepsis. It just wastes space and we can’t comment on it.

Reply 6: Thank You. Now it is deleted as suggested.

Comment 7:

Cefazolin misspelled on page 12

Reply 7: Thank You. It is corrected.

Comment 8:

Discussion: No comments

Comment 9:

References: No comments